

APPLICATION FOR A COPY OF A MARRIAGE OR CIVIL UNION CERTIFICATE

INSTRUCTIONS

1. Type or print all information clearly.
2. Payment should be by check or money order if mailed (no cash please), and we do not accept credit or debit cards
3. Certified copies are \$10.00 each, payable to the Town of Marshfield
4. Sign and date this application and return it with a self-addressed, stamped envelope to:

**Town Clerk's Office
122 School Street, Room 1
Marshfield, VT 05658**

Information on Certificate

Date of Marriage or Civil Union: _____

Name on Certificate: _____ Date of Birth: _____

Name on Certificate: _____ Date of Birth: _____

Applicant Information

Name: _____

Address: _____

Phone: _____

Intended Use of Certificate: _____

Signature: _____ Date: _____